

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	TJ A - M	953 JC 580	06-20-01 10-09-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Decr.	Date
1	✓	✓		10/10/01
2	✓	✓		10/10/01
3	✓	✓		10/10/01
4	✓	✓		10/10/01
5	✓	✓		10/10/01
6	✓	✓		10/10/01
7	✓	✓		10/10/01
8	✓	✓		10/10/01
9	✓	✓		10/10/01
10	✓	✓		10/10/01
11	✓	✓		10/10/01
12	✓	✓		10/10/01
13	✓	✓		10/10/01
14	✓	✓		10/10/01
15	✓	✓		10/10/01
16	✓	✓		10/10/01
17	✓	✓		10/10/01
18	✓	✓		10/10/01
19	✓	✓		10/10/01
20	✓	✓		10/10/01
21	✓	✓		10/10/01
22	✓	✓		10/10/01
23	✓	✓		10/10/01
24	✓	✓		10/10/01
25	✓	✓		10/10/01
26	✓	✓		10/10/01
27	✓	✓		10/10/01
28	✓	✓		10/10/01
29	✓	✓		10/10/01
30	✓	✓		10/10/01
31	✓	✓		10/10/01
32	✓	✓		10/10/01
33	✓	✓		10/10/01
34	✓	✓		10/10/01
35	✓	✓		10/10/01
36	✓	✓		10/10/01
37	N	✓		10/10/01
38	?	✓		10/10/01
39	✓	✓		10/10/01
40	✓	✓		10/10/01
41	N	✓		10/10/01
42	✓	✓		10/10/01
43	N	✓		10/10/01
44	✓	✓		10/10/01
45	✓	✓		10/10/01
46	✓	✓		10/10/01
47	✓	✓		10/10/01
48	✓	✓		10/10/01
49	✓	✓		10/10/01
50	✓	✓		10/10/01

10/08/01
C-C
10/10/01
C-C

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

Best Available Copy